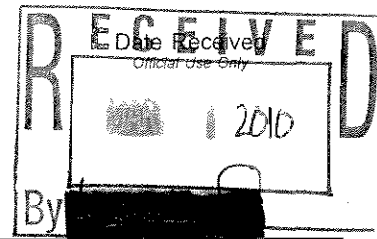


CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A Public Document



Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER
Bradford	Steven	C	[REDACTED]
MAILING ADDRESS (Business Address Acceptable)	STREET	CITY	STATE ZIP CODE
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
OPTIONAL: E-MAIL ADDRESS			

1. Office, Agency, or Court

Name of Office, Agency, or Court:

California State Assembly

Division, Board, District, if applicable:

51st Assembly District

Your Position:

Assemblymember

► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: _____

Position: _____

2. Jurisdiction of Office (Check at least one box)

☒ State

☐ County of _____

☐ City of _____

☐ Multi-County _____

☐ Other _____

3. Type of Statement (Check at least one box)

☐ Assuming Office/Initial Date: ____/____/____

☐ Annual: The period covered is January 1, 2009, through December 31, 2009.

-or-

☒ The period covered is 9/11/09 through December 31, 2009.

☐ Leaving Office Date Left: ____/____/____
(Check one)

☐ The period covered is January 1, 2009, through the date of leaving office.

-or-

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate Election Year: _____

4. Schedule Summary

► Total number of pages including this cover page: 4

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☐ Yes – schedule attached
Investments (Less than 10% Ownership)

Schedule A-2 ☐ Yes – schedule attached
Investments (10% or Greater Ownership)

Schedule B ☐ Yes – schedule attached
Real Property

Schedule C ☐ Yes – schedule attached
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)

Schedule D ☐ Yes – schedule attached
Income – Gifts

Schedule E ☐ Yes – schedule attached
Income – Travel Payments

-or-

☐ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed

Signature

STATEMENT OF ECONOMIC INTERESTS
FAIR POLITICAL PRACTICES COMMISSION
COVER PAGE

10 MAR -1 PM 4:10 Public Document

Date Received
Official Use Only
FEB 26 2010
By: [Redacted]

Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER
Bradford	Steven	C	[Redacted]
MAILING ADDRESS (Business Address Acceptable)	STREET	CITY	STATE ZIP CODE
[Redacted]	[Redacted]	[Redacted]	[Redacted]
OPTIONAL: E-MAIL ADDRESS			

1. Office, Agency, or Court

Name of Office, Agency, or Court:
California State Assembly

Division, Board, District, if applicable:
51st Assembly District

Your Position:
Assemblymember

► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: _____

Position: _____

2. Jurisdiction of Office (Check at least one box)

- ☒ State
- ☐ County of _____
- ☐ City of _____
- ☐ Multi-County _____
- ☐ Other _____

3. Type of Statement (Check at least one box)

- ☐ Assuming Office/Initial Date: ____/____/____
- ☒ Annual: The period covered is January 1, 2009, through December 31, 2009.
- or-
- ☐ The period covered is ____/____/____, through December 31, 2009.
- ☐ Leaving Office Date Left: ____/____/____ (Check one)
- ☐ The period covered is January 1, 2009, through the date of leaving office.
- or-
- ☐ The period covered is ____/____/____, through the date of leaving office.
- ☐ Candidate Election Year: _____

4. Schedule Summary

- Total number of pages including this cover page: 5
- Check applicable schedules or "No reportable interests."
- I have disclosed interests on one or more of the attached schedules:
- Schedule A-1 ☒ Yes – schedule attached
Investments (Less than 10% Ownership)
- Schedule A-2 ☐ Yes – schedule attached
Investments (10% or Greater Ownership)
- Schedule B ☐ Yes – schedule attached
Real Property
- Schedule C ☒ Yes – schedule attached
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)
- Schedule D ☒ Yes – schedule attached
Income – Gifts
- Schedule E ☐ Yes – schedule attached
Income – Gifts – Travel Payments
- or-
- ☐ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: FEB 26 2010
[Redacted Signature]
[Redacted Name]

SCHEDULE A-1
Investments

Stocks, Bonds, and Other Interests
(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Steven C. Bradford

<p>▶ NAME OF BUSINESS ENTITY <u>International Business Machines</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Investment, Data Technology</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income of \$0 - \$500 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/09 ____/____/09 ACQUIRED DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY _____</p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY _____</p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income of \$0 - \$500 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/09 ____/____/09 ACQUIRED DISPOSED</p>
<p>▶ NAME OF BUSINESS ENTITY _____</p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY _____</p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income of \$0 - \$500 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/09 ____/____/09 ACQUIRED DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY _____</p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY _____</p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income of \$0 - \$500 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/09 ____/____/09 ACQUIRED DISPOSED</p>
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Comments: _____

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name Steven C. Bradford

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

Southern California Edison

ADDRESS (Business Address Acceptable)

505 S. Maple Avenue

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Utility Company

YOUR BUSINESS POSITION

Regional Manager

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☒ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment

☐ Sale of _____
(Property, car, boat, etc.)

☐ Commission or ☐ Rental income, list each source of \$10,000 or more

☐ Other _____
(Describe)

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment

☐ Sale of _____
(Property, car, boat, etc.)

☐ Commission or ☐ Rental income, list each source of \$10,000 or more

☐ Other _____
(Describe)

► **2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000
☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000
☐ OVER \$100,000

INTEREST RATE

_____ % ☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None ☐ Personal residence

☐ Real Property _____
Street address

City

☐ Guarantor _____

☐ Other _____
(Describe)

Comments: _____

SCHEDULE D
Income - Gifts

► NAME OF SOURCE
City of Los Angeles
 ADDRESS (Business Address Acceptable)
1400 K Street
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12 / 1 / 09</u>	<u>\$ 150.00</u>	<u>Shuttle Services</u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE
BAPAC
 ADDRESS (Business Address Acceptable)
711 East Walnut Street, Pasadena CA
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>9 / 30 / 09</u>	<u>\$ 100</u>	<u>Reception/Meal</u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE
Rainbow Coalition Push Awards
 ADDRESS (Business Address Acceptable)
30 East 50th Street, Chicago IL 60615
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>11 / 13 / 09</u>	<u>\$ 300</u>	<u>Reception / Meal</u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE
Whose Black in Los Angeles
 ADDRESS (Business Address Acceptable)
1801 Watermark Drive, Columbus Ohio
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>11 / 17 / 09</u>	<u>\$ 75.00</u>	<u>Reception/Meal</u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

Comments: _____

EB

RECEIVED
SCHEDULE D
Income - Gifts
APR 8 2010
BY: llgo

RECEIVED

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

APR 8 2010 AMENDMENT

NAME OF SOURCE
Black American Political Association of California
ADDRESS (Business Address Acceptable)
711 East Walnut Street, Pasadena CA 91101
BUSINESS ACTIVITY, IF ANY, OF SOURCE
501(c)(3) Non-profit

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 2 / 10	\$ 100.00	Reception/Meal
	\$	
	\$	

NAME OF SOURCE
Rainbow Push Coalition Awards
ADDRESS (Business Address Acceptable)
30 East 50th Street, Chicago IL 60615
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Social Justice Organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 13 / 09	\$ 300.00	Reception/Meal
	\$	
	\$	

NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
	\$	
	\$	
	\$	

NAME OF SOURCE
City of Los Angeles
ADDRESS (Business Address Acceptable)
1400 K Street, Sacramento CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Cities Governing Body

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 1 / 09	\$ 150.00	Shuttle Services
	\$	
	\$	

NAME OF SOURCE
Whose Black In Los Angeles
ADDRESS (Business Address Acceptable)
1801 Watermark Drive, Columbus Ohio 43215
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Publishing Company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 17 / 09	\$ 75.00	Reception/Meal
	\$	
	\$	

Verification

Print Name Steven C. Bradford

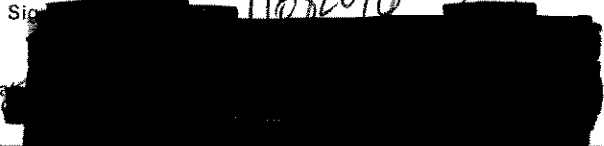
Office, Agency or Court California State Assembly

Statement Type ☒ 2009/2010 Annual ☐ Assuming ☐ Leaving
☐ _____ Annual ☐ Candidate

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 4/8/2010

Signature 

Comments: _____

EB

RECEIVED

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

SCHEDULE D

Income - Gifts

APR 8 2010

AMENDMENT

BY: llga

▶ NAME OF SOURCE
Black American Political Association of California

ADDRESS (Business Address Acceptable)
711 East Walnut Street, Pasadena CA 91101

BUSINESS ACTIVITY, IF ANY, OF SOURCE
501(c)(3) Non-profit

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 2 / 10	\$ 100.00	Reception/M meal
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

▶ NAME OF SOURCE
Rainbow Push Coalition Awards

ADDRESS (Business Address Acceptable)
30 East 50th Street, Chicago IL 60615

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Social Justice Organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 13 / 09	\$ 300.00	Reception/M meal
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

▶ NAME OF SOURCE
City of Los Angeles

ADDRESS (Business Address Acceptable)
1400 K Street, Sacramento CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Cities Governing Body

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 1 / 09	\$ 150.00	Shuttle Services
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

▶ NAME OF SOURCE
Whose Black In Los Angeles

ADDRESS (Business Address Acceptable)
1801 Watermark Drive, Columbus Ohio 43215

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Publishing Company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 17 / 09	\$ 75.00	Reception/M meal
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

Verification

Print Name Steven C. BradfordOffice, Agency or Court California State AssemblyStatement Type ☒ 2009/2010 Annual ☐ Assuming ☐ Leaving
☐ _____ Annual ☐ Candidate

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I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Sign 4/8/2010

Signature

Comments: _____